

# 2023 DOMESTIC PART-TIME RATE SHEET

Monthly, pre-tax employee contribution rates are shown; divide rate by two to obtain biweekly, pre-tax rates.

## MEDICAL PLAN EMPLOYEE CONTRIBUTIONS

Coverage Level	PPO Option 1	PPO Option 2	Highmark EPO	UPMC HMO	High-Deductible PPO with HSA
<b>Employee Only</b>					
Highmark	\$428	\$367	\$377.50	—	\$306
UPMC	\$289	\$233.50	—	\$315.50	\$197
<b>Employee and 1 Child</b>					
Highmark	\$784	\$676.50	\$777	—	\$573.50
UPMC	\$547	\$450.50	—	\$649.50	\$359.50
<b>Employee and 2+ Children</b>					
Highmark	\$885	\$764.50	\$894	—	\$650
UPMC	\$621	\$511.50	—	\$747.50	\$410
<b>Employee and Spouse/Domestic Partner</b>					
Highmark	\$986.50	\$854	\$1,011	—	\$726.50
UPMC	\$694.50	\$574	—	\$845	\$462
<b>Family</b>					
Highmark	\$1,391.50	\$1,205.50	\$1,479	—	\$1,030.50
UPMC	\$988	\$820	—	\$1,236.50	\$665.50

## PRESCRIPTION PLAN EMPLOYEE CONTRIBUTIONS

Coverage Level	Option A	Option B
Employee Only	\$236	\$79.50
Employee and 1 Child	\$421.50	\$154
Employee and 2+ Children	\$475	\$175
Employee and Spouse/ Domestic Partner	\$527.50	\$196.50
Family	\$739	\$281